

can YOU trust your lover?

BY MARK SCHOOFS

Gay Couples Weigh the Risk of Unprotected Sex

WE HAVE VERY wild sex," Eric chuckles, "no holds barred, wreck the room." But no matter how wild things got, he and his boyfriend William always used a condom, until they had been seeing each other for about six months. Then they abandoned the latex.

They negotiated that decision the way lovers often do. "We kept pushing the limits," Eric recalls. "Stick it in and pull it right out. Then later we'd stick it in, and go in and out for a while." Finally, they ratified in words what they had already decided with their bodies. The discussion, which occurred in the slackness of afterglow, lasted for "maybe two minutes." But then, what was there to discuss? They had long ago told each other their HIV-status—both negative—and as for sex outside the relationship, they were each "smart enough to be

safe," as Eric puts it.

So in New York City, where up to half the gay men are thought to be infected, Eric and William felt protected by logic: If neither partner is infected with HIV, then the virus cannot be transmitted between them.

Eric and William are hardly alone in reaching this conclusion. Studies show that men in relationships where both partners have the same HIV status are much more likely to have unprotected anal sex than men in sero-discordant couples or men who don't know whether their partner is infected. Research consistently indicates that gay men are far more likely to forgo condoms when having sex with a lover than with a casual partner. A recent study of HIV-negative male couples, by San Francisco researcher Colleen Hoff, showed that over the previous month, almost one quarter had unprotected anal intercourse to ejaculation. About the same was

true for positive couples. But in sero-discordant relationships, the act was rare.

A separate study asked young gay men about sex over the previous two months. It found that 51 per cent of the respondents in couples had unprotected anal sex. By contrast, only a fifth of the single men had discarded their rubbers during the same period. "The dynamics of being in a relationship," concluded the study's principal investigator, Dr. Robert Hays, "increase the likelihood of sexual risk-taking."

The risk for HIV-positive couples is mutual reinfection, although this remains the subject of much debate. By exchanging semen, positive men might also contract other sexually transmitted diseases, thus weakening their immune systems. But clearly, the stakes are lower for these couples than for partners who are negative.

The crucial prevention question is: Can HIV-negative couples abandon condoms and still

be safe? Researchers in Australia have coined a term for couples who have decided to forgo rubbers: "negotiated safety." But in a sharply worded dissent in the scientific journal *AIDS*, six prevention researchers pointed out that making this strategy work requires honest communication about emotionally volatile subjects. They offered an alternative term: "negotiated danger."

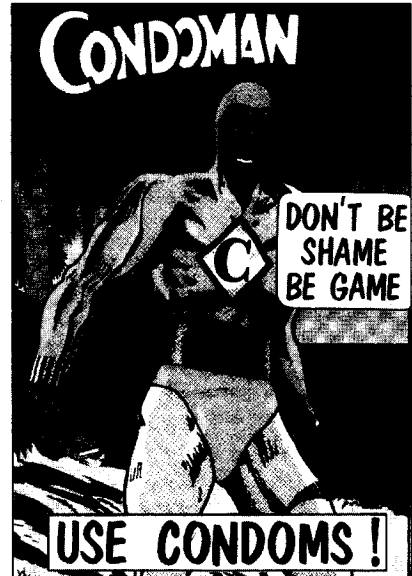
Undeterred, Australian prevention workers have launched prevention campaigns to educate couples on how to responsibly forgo condoms, but almost no one has followed their lead. In fact, AIDS prevention campaigns usually neglect gay couples. A new federally funded council in New York, the Prevention Planning Group, has targeted for special safer-sex messages numerous gay subgroups: gay men of color, young gays, men who don't identify as homosexual but have sex with other males, prisoners, and so on. But the PPG plan does not

mention gay couples *at all*, despite clear evidence that droves of them are having unprotected sex.

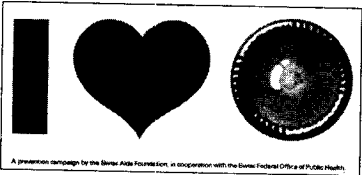
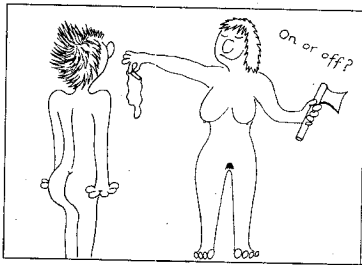
The rectum is the main portal through which HIV enters gay men's bodies. So why can't couples who enjoy the act just slip on a condom?

"That's a ridiculous question," fumes William Johnston, author of the forthcoming book *HIV-Negative: How the Uninfected Are Affected by AIDS*. Lovers want to know each other, their smells and tastes and secret sensations. "It feels good," says Johnston. "It expresses intimacy."

When heterosexual married couples test negative, argue these advocates, they are not admonished to continue using rubbers. Why should it be different for gay couples? The proportion of straight people infected with HIV is much smaller than the proportion of gay men, answer some public health pro-



AIDS prevention, the old wave: optimism. Right: "Condoms, too, can save lives."



Safe sex ads have often tempered candor with comedy.

professionals, and that makes an outside dalliance less dangerous for heterosexuals. Then too, gay male culture smiles on open relationships while straight married culture frowns on them. Still, the edict to use a condom every time ranks *New York Newsday* columnist Gabriel Rotello, who is working on a book about HIV prevention among gay men. "You can trust a piece of latex, even though we know condoms fail at a significant rate, but you should not even consider trusting your partner?" he asks. "That is a profoundly devaluing idea."

Ultimately, the question of negotiated safety forces partners to weigh their trust in each other against the consequences of betrayal—and to do so in the midst of homophobia, gay men's free-wheeling sexual culture, and the epidemic itself.

In 1985, frightened by the emerging epidemic, Peter stopped having both anal and oral sex. But in 1990 he fell in love. Even though he and Frank were HIV-negative, they abstained from fellatio for their first nine months together. Then, "tired of having HIV constrain my behavior" and wanting to please his lover, Peter began sucking Frank, but pulling away before ejaculation. For more than a year, that was as risky as their sex got.

But one day, they were making love in a pine forest. Peter looked up at Frank and told him to "curn in my mouth." As soon as Peter said this, dread and desire flared up inside him, and he started shaking. It was, he recalls, "like my first sexual experience."

Frank pulled away, afraid that if he did come in his mouth, Peter would regret it. After talking it over, the two began to swallow each other's semen, something Peter now finds "very erotic, a way of sharing something with him that makes me feel very content, very bonded, and very secure." But anal sex remained something they did not do, even with a condom.

Some gay couples abstain from anal sex altogether, either because rubbers can break, or because they can deflate an erection, or because they remind them of the disease. For negative couples, banishing condoms can feel like replacing safe sex with a safe space. As one gay man put it, unprotected sex in a monogamous relationship would "shut the door on the epidemic."

It was over the weekend commemorating the 25th anniversary of the Stonewall rebellion that Frank, in the middle of making love to Peter, said he'd like to mount him sometime. "How about now?" Peter replied. He wasn't shaking when he said it, and so Peter was entered for the first time in his life

without the protection of a condom. "It felt," he recalls, "like a liberation."

People like Peter are "putting themselves in a situation where their sero-status depends on judgments made by somebody else," says Ron Stall, who has been researching HIV transmission among gay men for more than a decade. "And I strongly recommend people not put themselves in that situation." But, says Peter, because "I was not getting fucked by a stranger but by my lover," defying that recommendation was profoundly satisfying. He admits "people may say I'm crazy," but insists that by making himself more vulnerable, he feels less vulnerable. "The responsibility to stay uninfected is a heavy burden, and I managed that alone for many years," he explains. "To share that responsibility was scary but also reassuring, because I could entrust someone else to take care of me."

Different couples abandon condoms for different reasons. Some use unprotected sex to symbolize commitment. "We don't have a marriage ceremony," explains Steven Ball, a local gay therapist who specializes in treating HIV-negative men, "but we are going to have some level of unsafe sex together." Some couples forgo rubbers to prove their affection. "To show you how much I love you," says Ball, spinning out the logic, "I'll even give you my survival." Other couples lay aside the latex because being in love fosters an illusion of security, while some get a thrill from transgressing safer-sex taboos. Finally, if you're sure your lover is negative, then why not?

Peter and Frank are still HIV-negative. But last February, two weeks after William ejaculated inside of him, Eric came down with flulike symptoms. Haunted by a hunch this might be "conversion sickness," the illness that signals a new HIV infection, Eric got tested. He was HIV-positive. Then William got tested. He was positive, too.

William insists he doesn't know how he contracted HIV. But both men know how Eric did. "I've had at least a thousand sexual partners in my life, and I remained negative," Eric muses. "I had gotten away with it for so long, and in the sleaziest circumstances. And then in a relationship with someone I cared about, I got infected."

Eric is "more angry at myself" than at William. In fact, after a brief separation, he and William are "boyfriends" again—though Eric says he'd "definitely consid-

er" going out with other men. But after being rejected by several men because he's infected, "it's more comfortable to be with someone who knows the whole story and went through it with me." He's also sticking with William because he's "nervous about not having anyone when or if I get sick." He pauses. "It's probably more a question of when."

Despite his fate, Eric believes it can be a "reasonable decision" for HIV-negative couples to have unprotected sex. He and William made their choice without any advice. Should AIDS workers offer such guidance?

That's too dangerous, argue many prevention workers; no matter how carefully crafted or well intentioned, such advice would end up sanctioning folly. Instead, they urge counselors to reemphasize using condoms with every partner. But some experts note that a great many gay couples seem to be tuning out that advice. They argue that the tragedy of Eric and William will happen again and again unless such couples are educated about what it takes to safely have sex unshielded. Indeed, they contend, promulgating just how tricky it is to safely abandon rubbers might actually reinforce condom use.

One Australian poster campaign tries to do just that. It contrasts two men shown from behind, one holding a condom and the other crossing his fingers. Johnston, the author of *HIV-Negative*, notes that in addition to symbolizing blind luck, crossed fingers behind the back symbolize unfaithfulness, the ultimate risk for couples who abandon condoms. Below the figure with crossed fingers is a long list of steps required to abandon rubbers and still be safe.

Peter and Frank found their way to almost all of these steps. But Eric and William didn't get to a single one. They never discussed how important anal sex without a condom was to each other. They didn't get tested together, and they didn't get tested a second time, six months later, to make sure the telltale antibodies weren't late in developing. They didn't define what if any sex would be acceptable outside the relationship. They didn't promise to tell each other if they slipped with someone else, and they didn't pledge not to punish each other if one or the other did slip.

Most importantly, they didn't discuss their own bond. "A lot of the trust was just implicit," says Eric, "because I felt pretty close with him." But romantic feelings are notoriously unreliable. People

often fall in love with love, and many gay couples, eager to compensate for the time they lost in the closet, may be especially susceptible to that foible. Eric and William had been together only half a year when they stopped using condoms. They were not living together. They were not sharing finances. To put it coldly, they trusted each other with their mortality before trusting each other with their money.

Such fool-for-love decision making is the fundamental reason many public health officials are so wary of muddying the condom message. Longtime AIDS prevention researcher Maria Ekstrand derides the negotiated-safety strategy: "People don't take a 30-step flowchart into bed." Even if promulgated in counseling sessions or other controlled settings, the regimen may be too demanding for most couples. As one gay man quipped, "It's for postdoctoral relationships."

Studies show that many men in relationships tend to protect their partner by being monogamous or extra careful if they have outside sex. But those same studies indicate that from 2 to 9 percent of men who have unprotected anal intercourse with their partner also do so with other people.

The very process of negotiating safety "sets up a dynamic where it's really difficult to be honest" about such mistakes, says Stall. It's made harder still by the colossal consequences of a "slip." Reeling from the knowledge that he may now be infected, the man who lapsed may fear losing his partner's love and support—so he may duck telling him, at least for a while. But because a person is especially infectious during the first six weeks after exposure to HIV, delay can be deadly.

And that assumes he knows—or can't deny knowing—that he had unsafe sex. Ekstrand notes that many men in her studies define themselves as HIV-negative, even though there's "no way" they could know, given the sex they've had since their last test. Peter and Frank limit their outside sex to kissing and mutual masturbation, but many prevention workers warn that's a slippery slope and only strictly monogamous relationships can be deemed safe. For people in love, discussing exactly what sex they can have with others can be excruciating.

The complex dynamics of negotiated

